



King County

VETERANS AND HUMAN SERVICES LEVY 2008 STRATEGY AREA ANNUAL REPORTS

Strategy 2.1(b-2)

Outreach and Engagement of Long-Term Homeless People in South King County Mobile Medical Unit

OBJECTIVE

The Levy's investment in Strategy 2 focuses on ending long-term homelessness through a variety of interventions including identification, outreach, prevention, housing, supportive services and education. The objective of Activity 2.1 of the Veterans and Human Services Levy is to identify, engage and house people who have been chronically homeless over the long term. This specific sub-activity, 2.1(b-2), is focused on providing outreach to those who are chronically homeless in South King County and promoting their engagement with primary health care, mental health care, chemical dependency treatment, housing, and other services through its Mobile Medical Unit project. Public Health–Seattle & King County's (PHSKC) Mobile Medical Unit is a partner project with sub-activity 2.1(b-1).

As the Levy's Service Improvement Plan noted (page 19), "Numerous studies have documented that outreach and engagement activities are particularly effective with chronically homeless individuals."

The Service Improvement Plan went on to state that the goal for outreach efforts in South King County would be to build infrastructure and capacity for coordinated, effective outreach and engagement of chronically homeless persons and to provide linkages to housing. Part of this infrastructure would involve support for a mobile medical services program as part of a continuum of services.

POPULATION FOCUS

The population focus for this strategy area is chronically homeless individuals in South King County. Someone who is chronically homeless is defined as a single adult suffering from a disabling condition who has been homeless for a year or had four episodes of homelessness in three years. Recent reports from Safe Harbors, King County's Homeless Management Information System, indicate that as many as half of all homeless single adults may meet the definition of chronic homelessness.

Within this subset of homeless people, veterans are a population of focus. Safe Harbors data for 2008 show that veterans are over-represented as a proportion of those who are homeless: veterans make up approximately 20 percent of the population of those who are homeless, compared with 10 percent of the overall county population.

PROGRAM DESCRIPTION

The mobile medical van holds regular clinics for homeless individuals in four different cities in the South End: Federal Way, Kent, Auburn and Tukwila. Each clinic is coordinated with a church-sponsored feeding program catering to chronically homeless people. Pastors help with publicity and logistics, such as arranging for private space inside the church for the project's intake and case management staff to meet with patients.

PROGRESS DURING 2008

A project coordinator was hired mid-summer 2008. During the third quarter, Public Health – Seattle & King County (PHSKC) conducted an extensive stakeholder input process for the project that included:

- Three focus groups with over 40 homeless adults in Federal Way, Kent, and Auburn to survey their needs and challenges
- Meetings with city staff members in Auburn, Burien, Des Moines, Federal Way, Kent, Renton, SeaTac, and Tukwila and telephone interviews of city staff members in Black Diamond and Enumclaw
- Discussions with representatives of South King County hospitals, churches, health centers, public health clinics, mental health agencies, shelters, social service agencies, and Washington State Department of Social and Health Services offices, as well as the Veterans Administration Puget Sound Health Care System.

After receiving this input, PHSKC developed a detailed implementation plan, finalized a contract with Metropolitan Development Council in Tacoma for the use of its mobile medical unit, and, in late November began clinic operations. Between November 26 and December 31, the project held four clinics for homeless individuals in four different cities in the South End: Federal Way, Kent, Auburn and Tukwila. Each clinic was coordinated with a church-sponsored feeding program catering to chronically homeless people. Pastors helped with publicity and logistics such as arranging for private space inside the church for the project's intake and case management staff to meet with patients.

The Mobile Medical Unit coordinated its activities with two newly hired, levy-funded Sound Mental Health outreach workers who are part of their Project for Assistance in Transition from Homelessness (PATH) team who made contact with a total of 114 individuals during fourth quarter. (Please see Levy Strategy 2.1 (b-1).)

After reviewing the Mobile Medical Project's 2008 results, PHSKC immediately began making operational adjustments to ensure the project's effectiveness in meeting its goals in 2009. Adjustments included:

- Improved tracking of the progress mobile medical patients make toward addressing their needs once their initial medical visit is over
- Soliciting input from veterans services programs regarding outreach strategies to increase the number of veterans the project serves.

SERVICES PROVIDED

Number Served. Between November 26 and December 31, 2008, the mobile medical van provided over 25 homeless individuals with a medical visit.

All of the 25 patients were screened for needs for assistance with:

- Establishing a primary care provider
- Identifying housing or shelter options
- Obtaining medical benefits
- Accessing mental health and/or substance abuse treatment
- Disability benefits application process
- Accessing food resources
- Transportation
- Employment
- Domestic violence
- Financial management.

Based on this screening, all but two of the 25 were referred by the project's medical team members to its outreach and case management team members for assistance with at least one of these needs.

Many of the 25 patients were successfully linked to services in the community and engaged with service providers. For example, a 44-year-old homeless female patient who complained of a breast lump during her visit to the mobile medical unit was assisted in accessing care at the Health Point Community Health Centers, where she received a mammogram and established a primary care home. She was then referred by her new Health Point CHC provider to a specialist, through whom she received diagnostic testing and learned that the lump was benign.

Living Situation. All but two of those who were served by the mobile medical van were homeless.

Living Situation	
Homeless	23
Not Homeless	2

Age Group. All served by the mobile medical van were adults; 84 percent were between age 35 and 59.

Age	
18-34	2
35-59	21
60-74	2

Gender. Nearly three-quarters of those served were male.

Gender		
Male	18	72 percent
Female	7	28 percent

Veteran Status. Only one of those served during December 2008 was a veteran; however, the program will be increasing outreach to veterans during 2009.

Veteran Status	
Veteran	1
Non-Veteran or Unknown	24

Race/Ethnicity. Most of those served during December 2008 were white.

Race/Ethnicity	
American Indian or Alaska Native	2
Asian, Asian-America	0
Black, African-American, African	2
Hawaiian Native or Pacific Islander	0
Hispanic, Latino	3
Multi-racial	1
White or Caucasian	17

FOR MORE INFORMATION

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